PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE HEB and PUBLICATION FEB (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mainted to the current correspondence address as included undersorded below or discreted otherwise. In Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "EVE-ADDRESS" (or

maintenance fee notificati	ions.					
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of eddress)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
26646	7590 08/21	/2009			-	
KENYON & K	ENYONILP			Certificate of Mailing or Transmission		
				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
ONE BROADW.				addressed to the Mai	1 Stop ISSUE FEE addres	s above, or being facsimile
NEW YORK, NY 10004						
					efiled by Helen Tam	(Signature)
					/Helen Tam/	
					November 17, 2009	(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/578,927	02/01/2007	02/01/2007			13806/27	3852
10/578,927 02/01/2007 Erwin Bayer 13806/27 3852 TITLE OF INVENTION: METHOD FOR CHECKING A BORE HOLE						
APPLN. TYPE	SMALL ENTITY	ISSUE FIXE DUE	PUBLICATION FEE I	DUE PREV. PAID ISSU	E PEE TOTAL PEE(S) DU	E DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	11/23/2009
EXAM	EXAMINER		CLASS-SUBCLASS	3		
EVANS, GEOFFREY S		3742	219-121710			
 Change of corresponde CFR 1.363). 	nce address or indicatio	n of "Fee Address" (37	2. For printing on the patent front page, list KENYON & KENYON LLP			
	andence address (or Cha	age of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
Address form PTO/SB		(2) the name of a	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			
"Fee Address" indi	cation (or "Fee Address	"Indication form	registered attorney or agent) and the names of up to			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent arrorseys or agents. It no name is 3			
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print	or type)		
PLEASE NOTE: Unk recordation as set forth	ess an assignee is ident in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on t T a substitute for filin	be patent. If an assignment.	nee is identified below, the	document has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
MTU AERO ENGINES GMBH Muenchen, Federal Republic of Germany						
Please check the appropri	ate assignee category or	categories (will not be p	rinted on the patent):	☐ Individual 🖾 C	Corporation or other private g	roup entity Government
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
☑ Issue Fee ☐ A check is enclosed.						
☑ Publication Fee (No small entity discount permitted) ☑ Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form						
5. Change in Entity Stat	us (from status indicate	d above)				
	SMALL ENTITY state		b. Applicant is no	longer claiming SMA	LL ENTITY status. See 37	CFR 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the r	f Publication Fee (if req records of the United Sta	uired) will not be accepte ates Patent and Trademar	ed from anyone other t c Office.	han the applicant; a reg	istered altorney or agent; or	the assignee or other party in
Authorized Signature // Cilfford A. Ulrich/				Date	November 17, 2009	
Typed or printed name				Registration		
m: 1 - 1 - 1 - 1 - 1		OFT 1 222 FB . 1.0	and a second section 4 to 100 to		thu muhilia suhiah la ta 61- 4-	ad by the LISPTO to co
an application of informa	ation is required by 37 C	CR 1.311. The informati	on is required to obtain	n or retain a penetit by is estimated to take 12	minutes to complete, includ	ing eathering, preparing, and
This collection of information is required by 37 CFR [3.1]. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO necessity as application, Confidentiality is governed by \$5 USFTO and \$7 CFR 1.4. This collection is estimated to but the confidentiality is governed by \$1 USFTO and \$7 CFR 1.4. This collection is estimated to the confidentiality is governed by \$1 USFTO and \$7 CFR 1.4. This collection is estimated to the confidential to the amount of time to we confidential to the confidential						
Box 1450, Alexandria, V	ons for reducing this bu irginia 22313-1450. DO 13.1450	rden, should be sent to the O NOT SEND FLES OR	e Uniel Information C COMPLETED FORM	Micer, U.S. Patent and IS TO THIS ADDRES	S. SEND TO: Commissione	r for Patents, P.O. Box 1450
Auckanders, vigna 22115-14-00. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						